

## **ST CLOUD VA HEALTH CARE SYSTEM Town Hall Meetings**

**September 8, 2014**  
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**1:30 - 3 p.m.**  
**5:00 - 6:15 p.m.**

**Building 96**  
**Building 8**

### **Minutes**

**Event Information and Attendees:** On September 8, 2014, the St. Cloud VAHCS conducted two Town Hall Meetings. The first meeting was held at 1:30 p.m. for Veteran residents of the Community Living Center. The second meeting was held at 5 p.m. and was for all enrolled Veterans and families. The 5 p.m. session was broadcast via video teleconference to the Alexandria, Brainerd and Montevideo CBOCs.

VA staff members in attendance included the Director, Chief of Staff, Nurse Executive and Associate Director, and all available Service Line Directors, Associate Directors, and Department Chiefs. Others in attendance included the Women Veterans Program Manager, Patient Advocates, Telehealth Coordinator and the Clinic Coordinators from the Alexandria, Brainerd and Montevideo CBOCs. The St. Paul Regional Office--VBA was represented by the Associate Director and representatives from the Pension Management Center and the Service Center.

Congressional office representatives from the offices of U.S. Senator Amy Klobuchar (D-MN), U.S. Senator Al Franken (D-MN), U.S. 6<sup>th</sup> District Congresswoman Michele Bachmann (R-MN), and U.S. 1<sup>st</sup> District Congressman Tim Walz (D-MN) were in attendance.

Approximately 30 residents of the CLC attended the CLC Town Hall, and approximately 40 Veterans attended the Town Hall.

**Purpose and Summary of Event:** The purpose of the meetings was to provide Veterans with an opportunity to voice their comments and concerns and also to have their concerns addressed by Leadership. At both events, the Director presented a short overview of services and issues, followed by approximately one hour of questions and answers. A combination of written questions and questions from the floor were presented. Subject matter experts provided responses to questions, when appropriate.

VA Leadership briefed the attendees on a variety of information ranging from highlighting members of the management team, outlining our current number of facility operating beds, patient uniques, timeliness for compensation and pension request processing, access, provider recruitment, operating budget, number of facility employees, construction updates, and the reaffirmation of the VA Values – Integrity, Commitment, Advocacy, Respect, and Excellence.

A summary of Veteran concerns and St. Cloud VAHCS discussed during the Town Hall meetings are outlined in sections 1 and 2. For convenience, the concerns were grouped into subject areas rather than listed in chronological order. Section 3 provides information on responsive actions taken or underway as a result of the information gathered at the meetings.

## Section 1: Summary of Veteran Concerns—CLC Town Hall

### **Facilities Management**

**Concern:** Why aren't there wheelchair accessible paths by the river so Veterans can enjoy the scenery and beautiful flowers? Why wasn't anything done for the handicapped when there was recent construction by the bridge abutment?

**Response/Follow-Up Action:** We will look into the possibility of constructing an accessible river path. Part of the bridge abutment project was a remodeling of the fishing pier, which is fully accessible to individuals in wheelchairs.

**Concern:** There is a need for handicapped accessible smoke shacks; wheelchair bound patients are not able to utilize the smoke shacks.

**Answer/Follow-Up Action:** Facilities Management will evaluate the accessibility of the smoke shacks.

**Concern:** What are they going to do with all of the cement that they spent billions of dollars on that is going to hell [sic]?

**Answer/Follow-Up Action:** We are communication with the contractor and contracting regarding the unacceptable concrete found in some of the sidewalk projects. The contractors are liable as far as warranty. We have a very knowledgeable and diligent engineering staff that ensures that projects are completed correctly.

**Concern:** Why don't they put in at least 3-0 (30 inch wide) doors when they remodel the areas? Doors are too narrow to accommodate wheelchair access. The best doors are 4-0 (40 inch wide) doors or 3-6 (35 inch wide) doors because it is hard for Veterans to get through the doors especially if their heads are shaking.

**Answer/Follow-Up Action:** All remodeled areas have 3-0 (30 inch wide) doors. Director of Facilities Management spoke with the Veteran immediately after the meeting to obtain further details regarding his concern.

**Concern:** The men's bathroom doors along the ground corridor between Buildings 50 and 51 have pictures on them that say they are wheelchair accessible but they aren't. It seems as if the doors weigh about 800 pounds, and there are no assists or stoppers. Why is that?

**Answer/Follow-Up Action:** Director of Facilities Management met with the Veteran immediately after the meeting to address his concerns and to obtain additional details for follow up.

**Concern:** Would like to see some nice furniture for visitors and guests on the units.

**Answer/Follow-Up Action:** Veteran recommendation noted.

**Concern:** Not adequate grab bars in the restrooms and shower rooms. Adequate grab bars would give the patients more confidence.

**Answer/Follow-Up Action:** Director of Facilities Management will follow up on concern.

**Concern:** Parking is an issue for visitors.

**Answer/Follow-Up Action:** Parking remains an issue across the campus. The St. Cloud VAHCS must follow standards that have been established by the MN Historical Society. The MN Historical Society does not want additional parking lots because it would distract from the historic nature of the campus. Two parking ramps have been included on the long-range plan for funding; the St. Cloud VAHCS is optimistic that there will be support of plans. The President also signed a law that prohibits additional storm water runoff, so if another parking lot is constructed, then there is additional runoff; therefore, something else at the VA needs to be torn down to offset the parking lot. A meeting with the MN Historical Society will be scheduled in the upcoming few months.

**Concern:** Why isn't there a crosswalk by Building 96?

**Answer/Follow-Up Action:** The crosswalks are at controlled intersections. Discussions have occurred regarding adding an additional crosswalk; however, that would call for adding more stop signs to have controlled intersections. Due to the overall safety of the campus, the crosswalk by Building 96 will be by the controlled intersection.

## **Nutrition and Food Service**

**Concern:** Numerous Veterans brought up issues with food service, including quantity, variety, cold food, and blandness of taste.

**Answer/Follow-Up Action:** The Clinical Dietitian provided responses to several questions and will follow up with Veterans who have specific dietary needs and requirement on an individual basis.

**Concern:** Need more variety of food along with more taste. There are a lot of different foods that a little bit of spice would make taste better.

**Answer/Follow-Up Action:** Meal cycles are planned on a three week rotation; therefore, it may feel like the residents are getting the same things. Condiment caddies are available on every cart for the Veteran to use if they wish. Dietary preferences will be followed up with the Dietician.

**Concern:** Why when you tell the food service that you don't like a certain item, they constantly put it on your tray?

**Answer/Follow-Up Action:** Nutrition and Food Service will follow up with the appropriate Dietitian to make sure that unwanted items are not placed on his tray. The

St. Cloud VAHCS currently utilizes a new system called Comp Nutrition which is intended to identify Veterans likes and dislikes. The Clinical Dietitian followed up with Veteran directly after the Town Hall to make sure that doesn't happen again.

**Comment:** A Veteran stated that he has been here five weeks and has had only one good meal in the whole five weeks, which he believes he brought in himself. He has been instructed to be on a no fat, low cholesterol, and no sodium diet. Veteran has now been told that he needs to start eating because he is losing weight. The Veteran states that he is not a complainer and is grateful for everything he gets.

**Answer/Follow-Up Action:** Veteran comment noted.

**Concern:** Why do meal times keep getting pushed back for Veterans on 50-1 and 49-2 which results in cold food? It seems like the evening is worse.

**Answer/Follow-Up Action:** The Nutrition department has been monitoring and tracking departure times for food. It appears that the times have improved; however, based on the feedback, additional monitoring will be completed for the evening meals. We will continue to perform audits and strive to meet needs.

**Concern:** A suggestion was made to keep cornflakes with sugar and oatmeal on the units.

**Answer/Follow-Up Action:** There are extra supplies in the kitchen such as oatmeal and cereals so if you are in need of them please ask for those things.

**Concern:** A suggestion was made to have a selective menu for Veterans.

**Answer/Follow-Up Action:** Selective menus are something that will be looked at in the future. Right now over 200 people are served and we are trying to work with likes and dislikes. A lot of individuals have diet or allergy issues that must be evaluated. Follow-up was initiated with the Veteran directly after the Town Hall.

**Concern:** A suggestion was made to have salt and pepper shakers on the table rather than the little packets that end up thrown on the floor.

**Answer/Follow-Up Action:** Veteran recommendation noted.

**Concern/Comment:** A Veteran would like to see a dietitian on the floors Monday-Friday.

**Answer/Follow-Up Action:** Veteran recommendation noted.

**Concern:** A statement was made that part of the food problem could be solved if the VA hired a chef.

**Answer/Follow-Up Action:** The VA has been looking into hiring additional culinary professionals; the St. Cloud VA currently has a chef. Alternate food items have been tested and members of the resident council have been involved. Nutrition and Food Service will continue to improve processes and strive to make special diets more palatable.

### Extended Care and Rehabilitation

**Concern:** Can we expand the pet therapy program on the units? Veteran organizations can provide funding and perhaps the animals could be purchased through donations.

**Answer/Follow-Up Action:** The expansion of the pet therapy program is currently being evaluated. The recommendation was noted.

**Concern:** A Veteran inquired why he can't play a game of golf. Veterans states that he has talked to recreation and the nursing staff.

**Answer/Follow-Up Action:** Recreation Therapist noted that some individuals cannot go off station by themselves. Individual has been taken on the golf cart a few times. The individual was instructed to work with his treatment team and to follow their recommendations.

### Business Office/Primary and Specialty Medicine

**Concern:** The wife of resident expressed concern about her husband's wait for brain surgery in Minneapolis. The wife wants to know why it couldn't have been done at the St. Cloud Hospital when he was there. She also wants to know why she is responsible for the bill for when her husband was taken to the Minneapolis VA via care cab when she could have driven him down there herself. She also has a bill for moving her husband from the St. Cloud Hospital to the St. Cloud VAHCS, but nobody told her that she would have to pay for it. His PT and OT was also taken away the wife asked for her husband to be put on PT again.

**Answer/Follow-Up Action:** Out of respect for privacy, the matter was addressed individually with the Veteran's wife immediately following the meeting.

### Compliments

- Thank you for your service and staff and professionalism. I think you do a great job.
- You have the best staff in the state of MN.
- I know there are issues that we have to look at, but I will put this staff above any other VA staff.

## Section 2: Summary of Veteran Concerns, Town Hall

### Business Office

**Concern:** Can any Veteran receive an ID card, even if they are not qualified to get help? Cards would be used for things such as business discounts for Veterans.

**Answer/Follow-Up Action:** Veteran ID cards are only available for Veterans who are enrolled and eligible for healthcare. VA does not issue cards for Veterans that are not enrolled for healthcare. In community settings, Veterans without VA-issued

identification can prove they are a Veteran by showing their DD214 and picture identification.

**Concern:** How do you ensure that care that goes through Non VA care is followed up on, and how do we ensure proper follow up is completed? How do you ensure the care provided by Non VA providers is quality?

**Answer/Follow-Up Action:** The St. Cloud VAHCS has good working relationships with providers in the area that provide Non VA care services for patients. However, it is always the Veterans preference if they want to remain at the VA to receive care. The St. Cloud VAHCS referral center notifies providers of the Non VA care findings to ensure that proper follow up is completed. If you do have an experience with a community vendor that you are not happy with, please let someone on our staff know so that it can be followed up on with the community provider.

## VBA

**Concern:** How do you use eBenefits to track your claim through the VBA system?

**Answer/Follow-Up Action:** Veterans must be enrolled in eBenefits in order to have the option to track a claim. A VBA representative (Dewey Kamp) comes to the St. Cloud VAHCS every Wednesday and can assist Veterans with enrolling in eBenefits. Once you are in eBenefits, you will receive notification noting your claim's progress.

## Veteran and Community Service

**Concern:** Why aren't provider pictures kept up-to-date in the lobbies and on the web page? Why can't pictures be taken of the providers using the camera that is used for patients when obtaining patient identification cards?

**Answer/Follow-Up Action:** Professional photographs are taken of providers for display and other public affairs purposes. The Veteran and Community Service office will follow up on provider pictures to ensure that they are kept as up-to-date as possible in both our facilities and on the web page. Other options will be pursued an effort to update pictures in a more timely manner.

**Concern:** It would be helpful to explain the process of the comment cards that are located throughout the facility.

**Answer/Follow-Up Action:** Comment cards are utilized throughout the facility. If an individual identifies that they would like to be contacted, they will be contacted, or at a minimum, three attempts will be made to contact them about the issue. Comments that are made on the cards are gathered and reported to the Customer Service Committee and the Quality Leadership Council. They are used to help formulate and refine policy in support of customer service efforts. They are very important and we treat them very seriously. We value your feedback.

## Primary and Specialty Medicine

**Concern:** How can a [Non VA] specialist diagnose a patient differently than the diagnosis given by a [VA] primary provider?

**Answer/Follow-Up Action:** Out of respect for the Veteran's privacy, the matter was addressed individually with the Veteran immediately following the meeting.

**Concern:** CPAP masks sized for women are not available.

**Answer/Follow-Up Action:** Veteran recommendation noted and forwarded for additional follow up.

## Surgical and Specialty Care

**Concern:** Orthotics are not available in women's sizes.

**Answer/Follow-Up Action:** Veterans recommendation noted and forwarded for additional follow up.

## Women Veterans Program

**Concern:** What are the plans to improve the Women's Clinic or bring the Women's Center up to National standards?

**Answer/Follow-Up Action:** The St. Cloud VAHCS meets the requirements for our model. We are working with our facility planner and all of the appropriate stakeholders to incorporate plans to expand the Women's Clinic due to the increased need for services and also to make it more comfortable for women Veterans. There is currently a construction project in the plans intended for a specific designated space for women's health.

## Mental Health

**Concern:** When will the peer led support group get their facilitator back to run the group and in a room that they can call their room? Is this just a money issue?

**Answer/Follow-Up Action:** Many of the Mental Health support groups were transitioned to peer led, based on evidence based practices. We recognize that peer led groups continue to be a concern; therefore, a listening session with members of St. Cloud VAHCS leadership has been scheduled for September 26, 2014. We recognize that the current group meeting location is not optimal and management continues to work on a better space that meets both privacy and security requirements.

This is not a money issue; it is an evidence based therapy issue. Although the St. Cloud VAHCS considers support groups an essential part of treatment, our licensed therapists are delivering evidence based care in other ways. The organization is also training peer leaders.

**Concern:** What is St. Cloud doing for Mental Health services for those that have experienced Military Sexual Trauma? Talk therapy is the only service and it is not

enough, nor is it going on in other VAs across the country. Why are services inconsistent?

**Answer/Follow-Up Action:** The St. Cloud VAHCS does have extensive Mental Health services for those that have experienced Military Sexual Trauma. We have a Military Sexual Trauma Coordinator. We also offer individualized evidence based treatment that can be ongoing. We also have group programming, although the number of individuals interested in the type of program fluctuates. In the Residential program in our PTSD track, there are also specific evidence based treatments available.

**Concern:** What campaign or initiatives do you have going forward to ensure continued outreach to OEF/OIF Veterans?

**Answer/Follow-Up Action:** The OEF/OIF/OND program is managed by Mike Mynczywor. Any OEF/OIF/OND Veteran that enrolls for care is screened by the OEF/OIF/OND team. Veterans that are identified as OEF/OIF/OND through the eligibility section are referred to Mike Mynczywor and the OEF/OIF/OND team for a follow up phone call and scheduling of an appointment. Kerri Schwegel is our Outreach Coordinator and is available to conduct outreach to any Veterans group.

**Concern:** Are we looking to train fellow Veterans to be peer advocates and leaders?

**Answer/Follow-Up Action:** We do have peer support and training as part of the residential program. Individuals start out as peer apprentices and go through a specific training process to become peer support specialist. We also have one that is part of the psychosocial rehabilitation program.

## **Veteran Employment**

**Concern:** Why does St. Cloud fall under the VA minimum for VA employees who are also Veterans? Why are the majority of Veteran employees in dining and cleaning services?

**Answer/Follow-Up Action:** Approximately 23% of the employees at the St. Cloud VA are Veterans. Much of the reason why we do not have more Veterans on staff is the lack of individuals applying for the positions. A majority of the positions that are vacant are clinical in nature, and a lot of times that particular level of education is not obtained, so Veterans do not apply. The St. Cloud VAHCS certainly has had many vacancies and whenever there is a Veteran that applies, they are strongly considered.. The positions in Housekeeping and Dietetics are considered entry level positions and are reserved for Veterans. Another factor is that there is not a large Veteran population in the area. There are no military bases nearby; therefore, the St. Cloud area does not attract many Veterans.

## **All Patient Care Service Lines**

**Comment:** What kind of checks and balances have been put in place to ensure that what has happened at the Minneapolis VA in regards to Veterans being overlooked for care and services does not happen here?



**Answer/Follow-Up Action:** Let's not overreact to what reports are out there until they have been thoroughly investigated. The St. Cloud VAHCS has approximately 360,000 outpatient visits per year. Out of 360,000 there is always a chance that a mistake may be made; hopefully they do not happen very often. We are doing our best to go around on a very regular basis to talk to people that have a part to play and encourage them that if they don't know what needs to be done or if they suspect something is not right or have any concerns at all, to feel free to bring it to our attention. The Compliance Officer is also available for people who wish to remain anonymous so that they don't have any reservations about speaking up. A lot of training is being completed. When the Access and Scheduling Audit team from VA came to St. Cloud, they liked our training program. We have a very good program for teaching people what to do.

### Whistleblower Protection

**Concern:** How do you ensure that employees are protected from whistleblower retaliation so that they have the comfort level to come forward?

**Answer/Follow-Up Action:** The Health Care System Director meets with every new employee on their first day of work and encourages all the new people that are coming to work that they are fresh eyes and if they see something that is not right, to speak up. Employees are encouraged to report things to their supervisor; however, if their supervisor is not listening, then they should go around their supervisor. Employees are instructed on several other options for reporting such as the Joint Commission, Office of Inspector General, or the Health Care System Director. This is reinforced during new employee orientation about 3 weeks later. Discussions are also held during staff meetings. Annual training is also completed.

### Compliments

- Thank you.
- You are doing a good job. I commend you all.
- I've had excellent care in every route. I've had the opportunity to visit many VAs across the country and this is by far the finest VA.
- The water yoga class for women has made a substantial difference in my pain level. I also attend the mind-body class which has also been wonderful.
- Receive great care from the VA.
- Thank you Mike and your OEF/OIF team for coming right to a unit to help stream the soldiers. I appreciate it! You do a great job.
- People who are great advocates of this VA are people who receive care here. Veterans who receive good care will encourage other Veterans. Veterans receive good care here. Patients are greeted when they enter the St. Cloud VAHCS; people smile. You feel like you are coming into a warm place, not like you are going to have an adversarial experience.

### Section 3: Report of Follow-up Actions

CONCERN	ACTION
1. Adding wheelchair accessible path along the river to future construction plans.	We will assess the feasibility of adding a wheelchair path by the river. The Medical Center embraces the privilege of stewardship of the natural and historic attributes of its campus. We recently completed two projects to enhance enjoyment of the campus, including an extensive sidewalk and walking path system, as well as an improved fishing pier along the Sauk River. Modifications to some areas, including the historic gardens constructed under the Depression-era Works Project Administration will require special consideration and collaboration between the Medical Center and the State Historic Preservation Office.
2. Evaluate the accessibility features of the smoke shacks.	Facilities Management has reviewed the designated smoking areas and will work with Community Living Center management to evaluate seating needs within the buildings to improve access.
3. Evaluate handicapped accessible doors in remodeled areas.	Future designs will evaluate the use of wider openings as appropriate.
4. Evaluate handicapped accessible restroom doors in the basement of Building 50 and 51.	The facility has tested the closing force of the doors identified and is in the process of adjusting closing devices as necessary.
5. Explore option of adding nice furniture and seating areas on the units for visitors and family.	Efforts will continue to add and improve both indoor and outdoor areas for use by our Veterans and their families and visitors.
6. Evaluate grab bars in restrooms and showers.	Facilities Management is currently reviewing the spaces to ensure that appropriate grab bars are available in accessible restrooms and showers.

<p>7. Evaluate dietary preference for Veterans.</p>	<p>Unit Clinical Dietitians met with individual Veterans regarding their specific dietary preferences and food requests after the meeting. Several common concerns were identified. These include:</p> <p>--Lack of variety: Nutrition and Food Services uses a three-week menu cycle, so depending on each Veteran's specific diet order and their food preferences, some residents may feel as though they are routinely receiving the same menu items.</p> <p>--Improving taste: Over the past year, Nutrition and Food Service identified the need for recipe flavor enhancement. In order to improve the taste of menu items and give routine recipes an upgrade, we have provided staff training from skilled culinary representatives. Trainings included: 1) Spice and seasoning in-service, reviewing how to use herbs and spices to bring in distinct and dynamic flavors; 2) Vegetable preparation, preserving the crispness of vegetables. 2) Sauce building, techniques to transform basic gravies into innovative sauces, transforming ordinary entrees into extraordinary menu items. We continue to seek additional culinary training and in-services for our food production team.</p>
<p>8. Evaluate delay in meals for CLC Veterans. Ensure consistency in meal times.</p>	<p>We have been tracking the time in which each cart departs from the tray assembling area for delivery to the unit. This tracking procedure has helped to improve timely service on a meal-by-meal basis and to identify units which were frequently receiving their meal carts late. We set a benchmark goal that 100% of carts will arrive at the unit within 5 minutes of the planned departure time. Though times may vary slightly based on the given meal, number of trays, and staffing levels, it is expected that carts arrive to the CLC unit within a ten-minute window of the projected arrival schedule. If carts will not be delivered within the planned timeframe, nursing staff must be notified. Through these efforts delivery times have improved, but we will work with nursing staff to confirm carts are, in fact, timely and that Veterans are cognizant of the times their trays are intended to arrive.</p>
<p>9. Explore addition of salt and pepper shakers for tables.</p>	<p>Many residents are managing various health conditions which require them to limit salt intake (cardiac, dialysis, etc.), so it is not advantageous to have salt shakers available for use at all tables. We continually make efforts to improve point-of-service meal satisfaction. For example, we provide a wide assortment of condiments, dressings, and seasonings on top of each unit's delivery cart. Per the discretion of the medical team, Veterans wishing to receive additional salt and pepper on their meal trays are encouraged to speak with their unit Dietitian.</p>

10. Explore option of having a Dietitian on the floor during meal delivery.	Dietitians would enjoy being on the units for every meal; however it is not always possible to be on each unit, at each meal, every day of the week. Dietitians do meal observation for each Veteran on a quarterly basis. Dietitians work closely with the care team to assure food preferences are met and that medical nutrition needs are addressed.
11. Explore option to expand pet therapy program.	Currently, pet therapy is provided by visiting dogs (11 at this time). We continue to support options for expansion of visiting pets. The Culture Change Committee will again explore options for a residential pet, focusing on one CLC unit on a trial basis.
12. Request to have Metro Bus and Dial-A-Ride tokens/fares sold in Canteen.	We will evaluate the suggestion of adding Metro Bus and Dial-A-Ride tokens/fares sold in the Canteen.
13. Obtain women sizes for C pap masks.	Additional mask sizes for women Veterans have been ordered and added to the existing stock items currently in place.
14. Obtain women size orthotics in Podiatry.	Prosthetics will now stock additional numbers and sizes of orthotics sized for women. Amounts stocked will be reviewed in six months to determine appropriateness of the stocking plan.
15. Listening session regarding peer led support groups mainly the Vietnam Veterans.	A listening session is scheduled with Leadership and the Vietnam Veterans.